

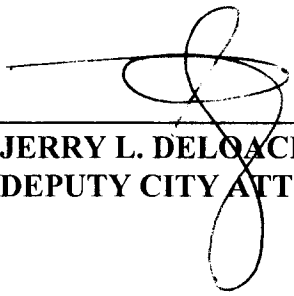
Entered - 10/13/03 - sb  
CL03L0816 - DIANNE C. MITCHELL

CLAIM OF: **YVONNE RUCKER,**  
through her attorney,  
**Weli and Associates**  
340 West Peachtree Street  
Suite 200  
Atlanta, Georgia 30308

04-R-0675

For damages alleged to have been sustained as a result of a vehicular accident on August 14, 2003 at Browns Mill Road and Jonesboro Road.

THIS ADVERSED REPORT IS APPROVED

BY:   
**JERRY L. DELOACH**  
DEPUTY CITY ATTORNEY

## ADVERSE REPORT

PUBLIC SAFETY &

LEGAL ADMINISTRATION COMMITTEE

DATE: 4/27/04

CHAIR: H. J. Smith

Mary Norwood

Asa Smith

Clara Hamilton

\_\_\_\_\_

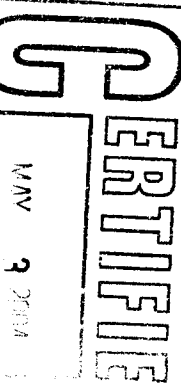
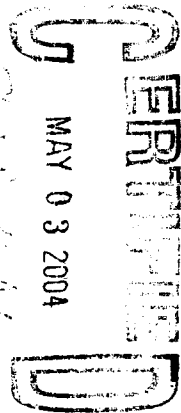
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ADVERSED**

MAY 03 2004



2



## OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC  
MUNICIPAL CLERK

May 13, 2004

55 TRINITY AVENUE, S.W.  
SECOND FLOOR, EAST  
SUITE 2700  
ATLANTA, GEORGIA 30335  
(404) 330-6033  
FAX (404) 658-6103

Weli and Associates  
Attorneys at Law  
Attn: Carmen Hurt  
340 West Peachtree St.  
Suite 200  
Atlanta, GA 30308

04-R-0675

RE: Yvonne Rucker

Dear Ms. Hurt:

I sincerely regret that your client has been adversely affected by the circumstances raised in his/her claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your client's claim at its regular meeting on December 01, 2004. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the **City Attorney's Office/Claims Division** at (404) 330-6400.

Yours very truly,

Rhonda Dauphin Johnson, CMC  
Municipal Clerk

cc: Claims Division/Law Department

**DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY**

Claim No. 03L0816

Date: April 6, 2004

Claimant /Victim YVONNE RUCKER  
BY: (Atty) Weli and Associates  
Address: 340 West Peachtree Street, Suite 200, Atlanta, Georgia 30308  
Subrogation:            Claim for Property damage \$                                  Bodily Injury \$ Not Stated  
Date of Notice: 10/01/03 Method: Written, proper           X           Improper             
Conforms to Notice: O.C.G.A. §36-33-5           X           Ante Litem (6 Mo.)           X            
Date of Occurrence 08/14/03 Place: Browns Mill Road and Jonesboro Road  
Department Public Works Bureau: Solid Waste Services  
Employee involved Darryl D. Winfrey Disciplinary Action:                                 

NATURE OF CLAIM: The claimant alleges she was injured in a vehicular accident with a City vehicle. However, the claimant has failed to provide information necessary to support her claim.

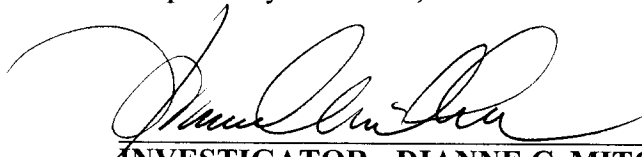
**INVESTIGATION:**

Statements: City employee            Claimant            Others            Written            Oral             
Pictures            Diagrams            Reports: Police           X           Dept Report           X           Other             
Traffic citations issued: City Driver                                  Claimant Driver                                   
Citation disposition: City Driver                                  Claimant Driver                                 

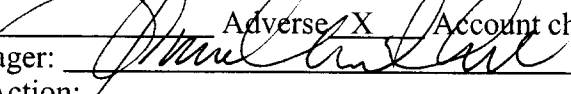
**BASIS OF RECOMMENDATION:**

Function: Governmental                                  Ministerial                                 X                                  
Improper Notice            More than Six Months            Other            Damages reasonable             
City not involved            Offer rejected            Compromise settlement             
Repair/replacement by Ins. Co.                                  Repair/replacement by City Forces                                   
Claimant Negligent            City Negligent            Joint            Claim Abandoned           X          

Respectfully submitted,

  
\_\_\_\_\_  
INVESTIGATOR - DIANNE C. MITCHELL

**RECOMMENDATION:**

Pay \$            Adverse           X           Account charged: 1A01            2J01            2H01            2P01             
Claims Manager:  Concur/date 04/14/04  
Committee Action:                                  Council Action

Post Mark Date 10/10/03  
By SW

**WELI & ASSOCIATES, P.C.**  
COUNSELORS AND ATTORNEYS AT LAW  
340 WEST PEACHTREE STREET, SUITE 200  
ATLANTA, GA 30308  
PHONE: (404) 230-2900  
FAX: (404) 230-2858

SW  
Mitchell  
10/10/03  
RECEIVED  
OCT 01 2003

September 18, 2003

MUNICIPAL CLERK

Attn: Ms. Sherry Butler  
City of Atlanta Municipal Clerk  
Law Department  
55 Trinity Ave S.W.  
Atlanta, GA 30303-3520

ENTERED - 10-13-03 - SB  
03L0816 - DIANNE MITCHELL

Our Client: Yvonne Rucker  
Your Insured: Darryl Winfrey  
DOA: August 14, 2003  
Claim No: Please Provide

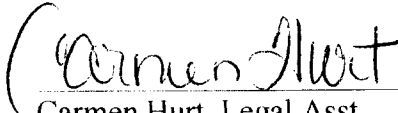
Dear Ms. Butler:

This is to confirm this firm's representation of Yvonne Rucker in a personal injury claim resulting from the above referenced incident. As a result of the occurrence, our client sustained injuries from which she is still receiving medical treatment. We will forward medical bills and reports to you as soon as they are received in this office.

Please provide us with the declaration page delineating the policy limit of the insured automobile insurance coverage as per O.C.G.A. 33-3-28 (7/31/89). **Also be advised that this office does not permit recorded statement of our client unless a lawsuit is filed.**

Thank you for your cooperation in this matter.

Very truly yours,  
WELI & ASSOCIATES, P.C.

  
Carmen Hurt, Legal Asst.

CCH/

04-R -0675